## Table of Contents IAB # SH 2258903

**INVESTIGATOR'S LOG** 

AUDIO/VIDEO TRACKING SHEET

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SUPERVISOR'S USE OF FORCE REPORT

WITNESS / INVOLVED DEPUTY INTERVIEWS

Deputy \_\_\_\_\_

Deputy Mat Taylor

WITNESS INTERVIEWS



#### **EXHIBITS**

A - Homicide Book

B - Photographs - Location of Shooting (Marked by deputies)

Photographs - Scene and aerial/(Compact Disc w/Photos)

Compact Disc containing Homicide interview audio files

E - Compact Disc containing voice-print of radio traffic

#### MISCELLANEOUS DOCUMENTS

Force/Shooting Review Admonishment Forms

# Los Angeles County Sheriff's Department Officer Involved Shooting

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|  |                 |                                    |                               |          |  |                            |                           |   | - 10 A   |                                      |
|--|-----------------|------------------------------------|-------------------------------|----------|--|----------------------------|---------------------------|---|--|--------------------------------------|
| Report Date:   | 01/14/          | /10                                | Bureau/Station/F              | acility. | FORII/CA   | RSON                       | STN                       | Admin. Inv  | /est.?   | Hit?                                 |
|  |                 |                                    |                               |          | ncident Informat   | all research to the second |                           |   |  |                                      |
| URN:   | 010-8           | 30004-16                           | 99-055                        |          | Date:  | 01/14                      | /10                       | T   | ime:   | 1541                                 |
| City or Station;   |                 | Los Ar                             | ngeles                        |          | Nature of Incident: Dattempted to detain   |                            |                           |   |  |                                      |
| Location: 515 W<br>LOS A   | ÆST GA<br>NGELE |                                    | BOULEVAR                      |          | would not comply w<br>sight of the suspect<br>fired one round from   | s right ha                 | nd. Fearing               | he was armir  | ng himself   |                                      |
| Location Type (circle one or more Backyard Beach Business Freeway Industrial Park Parking Lot Residence Rural School Street Other: | re):            | Darkn<br>Daylig<br>Other<br>Street | t Lights<br>(ctrcle only one) |          | Incident Type (circle Accidental Armed Person Fleeing Suspect Foot Pursuit Gun Take Away Moving Vehicle Sniper/Ambush Startle Struggle Involved Traffic Stop Unintentional Vehicle Pursuit Warrant Service | one or mo                  | ire):                     | Arres Call Obse One Othe Sear Two Prior A Dete Inma | ch Warrant<br>Person Uni<br>telivity ( <i>ctro</i><br>ective<br>ate Transpo  | t<br>le only one):                   |
| Total # of Shots Fir   | ed by Deput     | ty Total # o                       | f Shots Fired by S            | uspect   | Warning Shot   |                            |                           | Agral   | (miso  | Caraina Haila                        |
| 1  |                 |                                    | 0                             |          | Other:   |                            | STANIS OF STANIS          | Aero l  | """ <u> </u>   | Canine Unit?                         |
|  |                 |                                    |                               | 7        | mployee Witnes   | ses ()                     |                           |   |  |                                      |
| Employee #   | Las             | t Name<br>T                        | aylor                         | First i  | Name<br>Mat  | м.I.<br>А.                 | ShiftTime (circle EM PM   |   | ShiftType<br>Regular   | (circle only one): Overtime Off Duty |
| Employee #   | Las             | t Name                             | aytor                         | First i  | Name   | M.I.                       | ShiftTime (circle         | le only one):                                       |  | (circle only one): Overtime Off Duty |
| Employee #   | Las             | t Name                             |                               | First i  | Name   | M.I.                       | ShiftTime (circle         | le only one):                                       |  | (clicle only one):                   |
|  |                 |                                    |                               | No       | n-Employee Witn  | esses :                    |                           | Day<br>1  | The state of the s |                                      |
| Last Name  |                 | ]                                  |                               |          |  | First I                    | łame                      |   |  | M.I.                                 |
| Street Address   |                 |                                    |                               | City     |  | Zip C                      | ode                       | Work<br>N//   |  | Home Ph                              |
| Last Name  |                 |                                    |                               |          |  | First I                    | lame                      |   |  | M.I.                                 |
| Street Address   |                 |                                    |                               | City     |  | Zip Co                     | ode                       | Work  | Ph   | Home Ph                              |
| Last Name  |                 |                                    |                               |          |  | First i                    |                           |   |  | M.I.                                 |
| Street Address   |                 |                                    | (                             | City     |  | Zip C                      | ode                       | Worl  | (Ph  | Home Ph                              |
| 50.363.97  |                 |                                    |                               | 40.11    | Supervisors  |                            | MALE STATE                |   |  | Part Part Control                    |
| Employee #   | Last Name       | 2                                  |                               | First Na | me   | M.I                        | (circle one or            |   | V  | Vitness to shooting                  |
|  |                 | Youn                               | g                             |          | Larry  | B.                         |                           | during shooti                                       | ng li  | nvolved in shooting                  |
| Employee #   | Last Name       |                                    |                               | First Na |  | M.I                        | (circle one or<br>On Duty | > '   |  | /itness to shooting                  |
|  |                 | Ashraf                             | nia                           |          | Walid  | S.                         | riesent d                 | luring shootir                                      | ıy II  | volved in shooting                   |
| Employee #   | tas I           | Name                               |                               |          | Watch Sergear  |                            | rst Name                  |   |  | M,I,                                 |
|  |                 |                                    | Bı                            | ugarin   |  | •                          |                           | Faye  |  | Α.                                   |
|  |                 |                                    |                               |          | Watch Command  | E .                        |                           |   |  |                                      |
| Employee #   | Last            | Name                               |                               |          |  | F                          | irst Name                 |   | The state of the s | <b>M</b> .l.                         |
|  |                 |                                    |                               | Hall     |  |                            |                           | Michelle  | е  | Α.                                   |

|     | PSTD Use Only |
|-----|---------------|
| SH# | 22589113      |

SH-R-438A rev. 3/07

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|  |   |  |  |   | oliout Informa  | tion  |  |   |  |   |
|--|---|--|--|---|---|-------|--|---|--|---|
| Arrival  | Date<br>01/14/1   | n A  | rrival Time  | 1750  | Date Submitted  | 05/03 | /10  | Date of Recommendation  |  |   |
| Employ   |   |  | ·  | 1750  |   |       |  |   |  | M.I ı   |
|  |   | St   | rong   |   |   |       | irst<br>IamÆri   | <u>C</u>  |  | , I.  |
| Employ   | ree # Last  | Name<br>Fig  | ores   |   |   | F     | irst<br>tamÆa  | rlos  |  | M.I E.  |
| Employ   | /ee # Last  | Name   |  | •   |   | -     | irst<br>samSte   |   |  | Mt.I R.   |
| Same a   |   |  | edericks   |   |   |       |  | name  |  |   |
|  |   |  |  | Sell You  | ng/Force in   |       | (e) (e)  |   |  |   |
| <i>lleth</i>   | od  |  |  |   |   |       | Typ  | e of Injury   | Body   | Part Injure   |
| AW) BC) BCCCH(T) CCCC(S) B(S) BCCCCH(T) BCCC(S) BCCCCH(T) BCCCC(S) BCCCCCCCCCCCCCCCCCCCCCCCCCCCCCCCCCCCC | Arwen Baton: (Control) Baton: (Impact) Bodily Fluids Canine Carotid Restraint Choke Hold Control Holds: (Control Control Holds: (Taked Chemical Chemical Agents (OC Chemical Agents (Toe Explosives Firearm (Handgun) Firearm (Rife) Firearm (Other) Flashbang Flashlight Other Weapon: Edger | Takedown)<br>own)<br>Spray)<br>ar Gas)                       | (OB) O O P P P P P P P P P P P P P P P P P   | ther Weapor<br>ersonal Wea<br>ersonal Wea<br>ersonal Wea<br>ersonal Wea<br>ersonal Wea<br>esstraint Devi<br>estraint Devi<br>estraint Devi<br>estraint Devi | i: Blunt Object i: Other pon: Feet/Leg: (Kick pon: Feet/Leg: (Kick pon (Hand/Arm) pon (Push) pon (Other) ce (Capture Net) ce (Handcuffs) ce:Hobble (Legs Or ce:Hobble (TARP) ce: REACT Belt | eep)  | (AB)<br>(AB)<br>(AB)<br>(AB)<br>(AB)<br>(AB)<br>(AB)<br>(AB) | Abrasion Bruise Burn Complaint of Pain Concussion Death Dislocation Dog Bite Fractures Gunshot Human Bite Lacerations Nerve Damage Organ Damage Paralysis Puncture Wound Soft Tissue Damage Sprain/Twists Unconscious | (AD) (AK) (AR) (BK) (BT) (CH) (EL) (FA) (FE) (FI) (GE) (HI) (HE) (HI) (IX) (KK) (SH) | Abdomen Ankle Arm Back Buttocks Chest Elbow Face Feet Fingers Genitals Groin Hand Head Hip Internal Knees Leg Neck Shoulder |
| Bran   | d   |  |  |   |   |       | (RM)   | Refused Med Treatment   |  | Wrist   |
| (AK)<br>(BN)<br>(BR)<br>(BW)   | AK-47<br>Benelli<br>Beretta<br>Browning   | (IV)<br>(JE)<br>(LO)<br>(LU)                                 | Iver Johnson<br>Jennings<br>Lordin<br>Luger  | (RÓ)<br>(SW)  | RGI<br>Rossi<br>Smith & Wesson<br>Sturm Ruger   | :     | (NN)   | NONE  |  |   |
| (CH)<br>(CO)<br>(DA)<br>(GL)<br>(HA)<br>(HI)<br>(HK)   | Charter Arms Colt Davis Industries Glock Harrington & Richards Hi Standard H & K Ithica   | (MA)<br>(MO)<br>(NC)<br>(NA)<br>(NO)<br>(RA)<br>(RM)<br>(RG) | Martin<br>Mossberg<br>NCI aka SKS<br>North American<br>Norinco<br>Raven<br>Remington<br>RG | (TA)<br>(WE)<br>(WN)<br>(US)<br>(YY)<br>(XX)  | Sterling Taurus Weatherby Winchester US Government Handmade (Inmate Homemade (Non-Ir Other Brand  |       | (12)<br>(20)<br>(21)<br>(22)                                 | 9 mm (24) .243<br>10 mm (25) .25 c<br>12 guage (30) .308<br>20 guage (35) .357<br>.22-250 (36) 30-6<br>22 caliber (38) .38 c  | aliber (<br>caliber (<br>caliber (<br>) caliber (                                    | 41) .410 guag<br>44) .44 caliber<br>45) .45 caliber<br>50) 50 mm<br>SL) Siug<br>WW) Other cali                              |

#### FORCE APPLIED (one code per block)

| Used By<br>(E# or S#) | Used Against<br>(E# or S#) | Method<br>(Code) | Brand<br>(Code) | Caliber<br>(Code) | Authorized<br>Weapon?<br>(Y/N) | Authorized<br>Ammunition?<br>(Y/N) | Type of Injury<br>(Code) | Body Part<br>(Code) |
|-----------------------|----------------------------|------------------|-----------------|-------------------|--------------------------------|------------------------------------|--------------------------|---------------------|
| S#1                   | E#1                        | UC               |                 |                   |                                |                                    | NN                       |                     |
| E#1                   | S#1                        | FH               | HK              | 45                | Y                              | Y                                  | GS                       | NK                  |
|                       |                            |                  |                 |                   |                                |                                    |                          |                     |
|                       |                            | <del></del>      |                 |                   |                                | 1                                  |                          |                     |
|                       |                            |                  |                 |                   |                                |                                    |                          |                     |
|                       |                            |                  |                 |                   |                                |                                    | <u></u>                  |                     |
|                       |                            |                  |                 |                   |                                |                                    |                          |                     |
|                       |                            |                  |                 |                   |                                |                                    |                          |                     |
|                       |                            |                  |                 | <u> </u>          |                                |                                    |                          |                     |
|                       |                            |                  |                 |                   | -                              |                                    |                          |                     |
|                       |                            |                  |                 |                   |                                |                                    |                          |                     |
|                       |                            |                  | <u> </u>        |                   |                                |                                    | <u> </u>                 |                     |

## Officer Involved Shooting Involved Employee Information

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|          |   |  |          | Involved                                       | Empl              | yee.        |         |         |                                  | \$100    |              |
|----------|---|--|----------|--|-------------------|-------------|---------|---------|----------------------------------|----------|--------------|
| E_1      | Employee #                                | Last Name  |          |  |                   |             | First # | vame.   |                                  |          | M.I.         |
|          | Sex: Race: M Caucsian                     | Rank Deputy She                                    | riff     | Unit Assignmen                                 | it:               |             | Work A: | ssignm  | neni (Uni <u>t #, Module, el</u> | tc.);    | <u> </u>     |
|          | ShiftTime (circle only one): EM Day       | ShiftType (circle only one):                       | f Duty   | Intoxication/Da                                | ıg Usage'i        | , 🔲         | Substa  | nce Us  | sed.                             |          |              |
|          | Hospital Admission?                       | Hospital Name:                                     |          | Coroner Case                                   | 7 🔲               |             | Corone  | r Case  | e#                               |          | nterviewed?  |
|          | Hrs of sleep prior to shooting:           | Duty Time (hrs):                                   |          | (circle only one):<br>lothes no Vest           | Raid Jack         | et w/ Vest  | Other F | actors  | <u>x</u>                         | ,        |              |
|          | Age: Height:                              | Weight:  |          | lothes w/ Vest<br>acket no Vest 🤇              | Uniform n         |             |         |         |                                  |          |              |
|          | Range Qualification Date:                 |  | PPC Qu   | alification Date:                              |                   |             |         |         | r Training Date:                 |          |              |
|          | Certified with Weapon Used?               | Patrol Certification?                              |          | ation Unit:                                    |                   | Prior Shoot | ings?   |         | Number of Prior Shootings:       | Directed |              |
|          | Weapons Fired Brand: H&K                  | Caliber .45  | # S      | nots 1   | Weapon:<br>Brand: | s Fired     |         |         | Caliber                          | # S      | Shots        |
|          | Field Training Officer Emp #              | Last Name  |          |  |                   |             | First N |         |                                  |          | M.I.         |
|          | Field Training Officer Emp #              | Last Name  |          |  |                   |             | First N | ame     |                                  |          | M.L          |
| E        | Employee #                                | Last Name  |          | ·  | . 1919            |             | First ! | Name    |                                  |          | M.I.         |
| <u> </u> | Sex: Race:                                | Rank   |          | Unit Assignmer                                 | nt:               |             | Work A  | ssignn  | nent (Unit #, Module, ei         | tc.):    |              |
|          | ShiftTime (circle only one): EM PM Day    | ShiftType (circle only one): Regular Overtime Of   | f Duty   | Intoxication/Dr                                | ug Usage'         | ? 🔲         | Substa  | nce Us  | sed                              |          | <del></del>  |
|          | Hospital Admission?                       | Regular Overtime Of<br>Hospital Name:              | Day      | Coroner Case                                   | ? 🗍               |             | Corone  | er Cas  | e #                              |          | Interviewed? |
|          | Hrs of sleep prior to shooting:           | Duty Time (hrs):                                   |          | (circle only one):<br>liothes no Vest          | Reid Jack         | cet w/ Vest | Other F | actors  | »:                               |          |              |
|          | Age: Height:                              | Weight:  | Plain 0  | ilothes no Vest<br>acket no Vest               | Uniform n         | o Vest      |         |         |                                  |          |              |
|          | Range Qualification Date:                 |  |          | alification Date:                              |                   |             | -       | Lass    | er Training Date:                |          |              |
|          | Certified with Weapon Used?               | Patrol Certification?                              | Certific | ation Unit:                                    |                   | Prior Shoo  | otings? |         | Number of Prior<br>Shootings:    |          | ed Force:    |
|          | Weapons Fired<br>Brand:                   | Caliber  | # S      | hots   | Weapon<br>Brand:  | s Fired     |         |         | Caliber                          | # 5      | Shots        |
|          | Field Training Officer Emp #              | Last Name  |          |  |                   |             | First N |         |                                  |          | М.І.         |
|          | Field Training Officer Emp #              | Last Name  | <i>,</i> |  |                   |             | First N | lame    |                                  | · · ·    | M.l.         |
| E        | Employee #                                | Last Name  |          |  |                   |             | First   | Name    | • • • •                          |          | M.I.         |
|          | Sex: Race:                                | Rank   |          | Unit Assignme                                  | nt:               |             | Work A  | ssignr  | nent (Unit #, Module, e          | da.):    |              |
|          | ShiftTime (circle only one):<br>EM PM Day | ShiftType (ctrcle only one):<br>Regular Overtime O | ff Duty  | Intoxication/Dr                                | ug Usage          | ?           | Substa  | ince U  | sed:                             |          |              |
|          | Hospital Admission?                       | Hospital Name:                                     |          | Coroner Case                                   | ? 🔲               |             | Corone  | er Cas  | e#                               |          | Interviewed? |
|          | Hrs of sleep prior to shooting:           | Duty Time (hrs):                                   |          | ( <i>circle only one</i> );<br>(lothes no Vest | Raid Jack         | ket w/ Ves  | Other I | Factors | s:                               | · · ·    |              |
|          | Age: Height:                              | Weight:  |          | lothes w/ Vest<br>acket no Vest                | Uniform r         |             |         |         |                                  |          |              |
|          | Range Qualification Date:                 |  | PPC Qu   | alification Date:                              |                   |             |         | Lase    | er Training Date:                |          |              |
|          | Certified with Weapon Used?               | Patrol Certification?                              |          | ation Unit:                                    |                   | Prior Sho   | otings? |         | Number of Prior<br>Shootings:    |          | ed Force:    |
|          | Weapons Fired<br>Brand:                   | Caliber  | # 9      | hols   | Weapon<br>Brand:  | s Fired     |         |         | Caliber                          | #        | Shots        |
|          | Field Training Officer Emp #              | Last Name  |          |  |                   |             | First N |         |                                  |          | M.I.         |
|          | Field Training Officer Emp #              | Last Name  |          |  |                   |             | First N | leme    |                                  |          | M.I.         |

#### Of Suspect Information

| fficer | Involved | Shooting | <b>1</b> i | JRN: | 010-80004-1699-055 |
|--------|----------|----------|------------|------|--------------------|
|        | 41.6     |          | • i        |      |                    |

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|          |   | <b>5</b>   |             | nformation  |   |                                    |
|----------|---|--|-------------|---|---|------------------------------------|
| S_1      | Last Name Alonzo  |  |             | First Name Adrian   |   | M.I. F.                            |
|          | AKA Last Name   |  |             | First Name  |   | M.I.                               |
|          |   |  |             |   |   |                                    |
|          | Sex: M Race: Hispanic   | Street Address:  |             | City  |   | State & Zip Code                   |
|          | Work Phone:   | Home Phone:  | Social Sec  | uritv #   | Driver's License #  |                                    |
|          | Age: D.O.B. 08/26/67  | Height: 5'09" Weight: 175  | F8! #       |   | CII#  |                                    |
|          | Booking # 2195612   | Primary Charge:<br>11351 H&S/Sale of Co  | ontrolled S | Secondary Charge:   | N/A   | <del></del>                        |
|          | Coroner Case?   | Coroner Case #   |             | Intoxication/Drug Usage?  | Substance Used:   |                                    |
|          | Armed?  | Apprehended?   |             | Mental lliness?   | Criminal History?   |                                    |
|          | Vehicle Make  | ·  | •           | Model:  | Year:   |                                    |
|          |   | N/A  |             | ·   |   |                                    |
| s        | Last Name   |  |             | First Name  |   | M.I.                               |
|          | AKA Last Name   |  |             | First Name  |   | M.I.                               |
|          | Sex: Race:  | Street Address:  |             | City  |   | State & Zip Code:                  |
|          | Work Phone:   | Home Phone:  | Social Sec  | urity #.  | Driver's License #:   |                                    |
|          | Age; D.O.B.   | Height: Weight:  | F81 #       |   | CII#  |                                    |
|          | Booking #   | Primary Charge:  |             | Secondary Charge:   |   |                                    |
|          | Coroner Case?   | Coroner Case #   |             | Intexication/Drug Usage?  | Substance Used:   |                                    |
|          | Armed?  | Apprehended?   |             | Mental Illness?   | Criminal History?   | ]                                  |
|          | Vehicle Make  |  |             | Model:  | Year:   | _                                  |
|          |   |  |             |   |   |                                    |
|          | 1 and Name  |  |             | First Marga   |   | N. 1                               |
| s        | Last Name   |  |             | First Name  |   | M.J.                               |
| s        | Last Name  AKA Last Name  |  |             | First Name<br>First Name  |   | M.I.                               |
| s        |   | Street Address:  |             |   |   |                                    |
| s        | AKA Last Name   | Street Address: Home Phone:  | Social Sec  | First Name<br>City  | Driver's License #:   | M.I.                               |
| <u>s</u> | AKA Last Name  Sex: Race:   |  | Social Sec  | First Name<br>City  | Driver's License #:   | M.I.                               |
| <u>s</u> | AKA Last Name  Sex: Race:  Work Phone:  | Home Phone:  |             | First Name<br>City  |   | M.I.                               |
| <u>s</u> | AKA Last Name  Sex: Race:  Work Phone:  Age: D.O.B.   | Home Phone:  Height: Weight:   |             | First Name City surity #:   |   | M.I.                               |
| <u>s</u> | AKA Last Name  Sex: Race:  Work Phone:  Age: D.O.B.  Booking #  | Home Phone:  Height: Weight:  Primary Charge:  |             | First Name  City  secondary Charge:   | CII#  | M.I.                               |
| <u>s</u> | AKA Last Name  Sex: Race:  Work Phone:  Age: D.O.B.  Booking #  Coroner Case?   | Home Phone:  Height: Weight:  Primary Charge:  Coroner Case #  |             | First Name  City  urity #:  Secondary Charge:  Intoxication/Drug Usage?   | CII # Substance Used:   | M.I.                               |
|          | AKA Last Name  Sex: Race:  Work Phone:  Age: D.O.B.  Booking #  Coroner Case?  Armed?   | Home Phone:  Height: Weight:  Primary Charge:  Coroner Case #  |             | First Name  City  Secondary Charge:  Intoxication/Drug Usage?  Mental Illness?  | CII #  Substance Used:  Criminal History?   | M.I.                               |
| S        | AKA Last Name  Sex: Race:  Work Phone:  Age: D.O.B.  Booking #  Coroner Case?  Armed?  Vehicle Make   | Home Phone:  Height: Weight:  Primary Charge:  Coroner Case #  |             | First Name  City  surity #:  Secondary Charge:  Intoxication/Drug Usage?  Mental Illness?  Model:   | CII #  Substance Used:  Criminal History?   | M.I. State & Zip Code:             |
|          | AKA Last Name  Sex: Race:  Work Phone:  Age: D.O.B.  Booking #  Coroner Case?  Armed?  Vehicle Make  Last Name  | Home Phone:  Height: Weight:  Primary Charge:  Coroner Case #  |             | First Name  City  Secondary Charge:  Intoxication/Drug Usage?  Mental Illness?  Model:  First Name  | CII #  Substance Used:  Criminal History?   | M.I. State & Zip Code:             |
|          | AKA Last Name  Sex: Race:  Work Phone:  Age: D.O.B.  Booking #  Coroner Case?  Armed?  Vehicle Make  Last Name  AKA Last Name   | Home Phone:  Height: Weight:  Primary Charge:  Coroner Case #  Apprehended?  |             | First Name  City  Secondary Charge:  Intoxication/Drug Usage?  Mental Illness?  Model:  First Name  First Name  City  | CII #  Substance Used:  Criminal History?   | M.I. State & Zip Code:  M.I.  M.I. |
|          | AKA Last Name  Sex: Race:  Work Phone:  Age: D.O.B.  Booking #  Coroner Case?  Armed?  Vehicle Make  Last Name  AKA Last Name  Sex: Race:   | Home Phone:  Height: Weight:  Primary Charge:  Coroner Case #  Apprehended?  Street Address:   | FBI#        | First Name  City  Secondary Charge:  Intoxication/Drug Usage?  Mental Illness?  Model:  First Name  First Name  City  | CII #  Substance Used:  Criminal History?  Year:  | M.I. State & Zip Code:  M.I.  M.I. |
|          | AKA Last Name  Sex: Race:  Work Phone:  Age: D.O.B.  Booking #  Coroner Case?  Armed?  Vehicle Make  Last Name  AKA Last Name  Sex: Race:  Work Phone:  | Home Phone:  Height: Weight:  Primary Charge:  Coroner Case #  Apprehended?  Street Address:  Home Phone:                                      | FBI#        | First Name  City  Secondary Charge:  Intoxication/Drug Usage?  Mental Illness?  Model:  First Name  First Name  City  | Cil #  Substance Used:  Criminal History?  Year:  Driver's License #:                         | M.I. State & Zip Code:  M.I.  M.I. |
|          | AKA Last Name  Sex: Race:  Work Phone:  Age: D.O.B.  Booking #  Coroner Case?  Armed?  Vehicle Make  Last Name  AKA Last Name  Sex: Race:  Work Phone:  Age: D.O.B.                           | Height: Weight:  Primary Charge:  Coroner Case #  Apprehended?  Street Address:  Home Phone:  Height: Weight:                                  | FBI#        | First Name  City  Secondary Charge:  Intoxication/Drug Usage?  Mental Illness?  Model:  First Name  First Name  City  curity #:                                   | Cil #  Substance Used:  Criminal History?  Year:  Driver's License #:                         | M.I. State & Zip Code:  M.I.  M.I. |
|          | AKA Last Name  Sex: Race:  Work Phone:  Age: D.O.B.  Booking #  Coroner Case?  Armed?  Vehicle Make  Last Name  AKA Last Name  Sex: Race:  Work Phone:  Age: D.O.B.  Booking #                | Height: Weight:  Primary Charge:  Coroner Case #  Apprehended?  Street Address:  Home Phone:  Height: Weight:  Primary Charge:                 | FBI#        | First Name  City  Secondary Charge:  Intoxication/Drug Usage?  Mental Illness?  Model:  First Name  First Name  City  Secondary Charge:                           | CII#  Substance Used:  Criminal History?  Year:  Driver's License #:  CII#                    | M.I. State & Zip Code:  M.I.  M.I. |
|          | AKA Last Name  Sex: Race:  Work Phone:  Age: D.O.B.  Booking #  Coroner Case?  Armed?  Vehicle Make  Last Name  AKA Last Name  Sex: Race:  Work Phone:  Age: D.O.B.  Booking #  Coroner Case? | Height: Weight:  Primary Charge:  Coroner Case #  Apprehended?  Street Address:  Home Phone:  Height: Weight:  Primary Charge:  Coroner Case # | FBI#        | First Name  City  Secondary Charge:  Intoxication/Drug Usage?  Mental Illness?  Model:  First Name  First Name  City  Secondary Charge:  Intoxication/Drug Usage? | CII #  Substance Used:  Criminal History?  Year:  Driver's License #:  CII #  Substance Used: | M.I. State & Zip Code:  M.I.  M.I. |

### **Investigative Summary**

Incident:

Hit Shooting

LASD Report:

010-80004-1699-055

IAB File:

SH2258903

#### **OPENING STATEMENT**

On January 14, 2010 (Thursday), Internal Affairs Bureau Sergeants Eric Strong and Carlos Flores responded to 515 West Gardena Boulevard, Los Angeles, where Carson Station Deputy ired one bullet from his department-authorized .45 caliber semiautomatic pistol at Adrian Alonzo (striking him). Suspect Alonzo, who had refused to take his right hand out of his pocket, made a turning movement toward the deputies while pulling his right hand from his pocket.

#### **SYNOPSIS**

Deputies Mat Taylor and were patrolling in the area of Denver Avenue and Gardena Boulevard. They saw a male and a female on the north side of Gardena Boulevard engaged in what they believed to be a narcotics transaction. They saw the male hand the female small items, which are consistent with the sales of narcotics.

The female saw the deputies and ran into an apartment complex and out of their view. Suspect Alonzo was still standing on the sidewalk. As the deputies stopped to approach the suspect, he reached into his right pants pocket and stiffened his arm while walking in their direction. Deputies ordered the suspect to stop and show his hands. He stopped momentarily, made eye contact with the deputies, then suddenly turned to his left and tried to scale a wrought iron fence, using only his left hand while keeping his right hand in his pocket. He was unable to climb the fence and dropped back to the ground. Despite continual orders to remove his right hand from his pocket, the suspect would not comply.

At this point the suspect started to turn to his left toward the deputies, causing both deputies to lose sight of his right hand. Believing the suspect was trying to arm himself and fearing for their safety, Deputy fired one round at the suspect, striking him. The suspect fell to the ground and was handcuffed by the deputies without further incident

Suspect Alonzo sustained a single gunshot wound to the neck. He was transported to Harbor/UCLA Medical Center where, he is listed in stable condition.

#### **INVOLVED PERSONNEL**

#### **WORK HISTORY**

Date of Employment:
Date Assigned to Patrol:

**Date Completed Patrol Training:** 

Date Assigned to Carson Station:

Prior Shooting Incident(s):

Prior Founded Force Incident(s):



#### SUSPECT

Adrian Francisco Alonzo, DOB: 08/29/67, Male/Hispanic, Black/Brown, 5'09 170 lbs.

#### **CIVILIAN WITNESSES**

#### **INJURIES**

Suspect Alonzo had a single gunshot wound in the neck area.

#### PHYSICAL EVIDENCE

For a detailed description of all physical evidence and where it was located refer to Homicide Bureau investigator's Supplemental Report, (Exhibit A, page 58). For additional information regarding evidence refer to the Supplemental Report and scene diagram, which was completed by the Scientific Services Bureau, (Exhibit A, page 67).

#### INVESTIGATORS OBSERVATIONS

For a detailed scene description refer to Homicide Bureau investigator's detailed scene description (**Exhibit A', page 60**). For additional scene information refer to the Supplemental Report and scene diagram, which was completed by the Scientific Services Bureau, (**Exhibit A, page 67**).

#### WEAPON USED BY DEPUTY

Heckler & Koch Universal Self-loading Pistol .45 caliber, serial



#### WEAPON USED BY SUSPECT ADRIAN ALONZO

Unarmed

#### PROPERTY DAMAGE

Bullet strike mark in wrought iron fencing.

#### CRIMINAL INVESTIGATOR

Sergeant Howard Cooper and Deputy Donna Cheek assigned to Homicide Bureau. Suspect Alonzo was charged with 11351 H&S, Sale of a Controlled Substance. It was determined that there was insufficient evidence to proceed with the above listed charge. However,

#### LIGHTING AND WEATHER CONDITIONS

The incident occurred at approximately 1541 hours and it was daylight. The weather was clear.

#### SCENE DESCRIPTION

For a detailed scene description refer to the Homicide Bureau investigator's detailed scene description (**Exhibit A**, **page 60**). For additional scene information refer to the scene diagram, which was completed by the Scientific Services Bureau (**Exhibit A page 69**).

#### WITNESS DEPUTY STATEMENTS

Deputy **Mat Taylor** was interviewed by Homicide Bureau investigators regarding his observations and actions during this incident. This interview was audio recorded and the verbatim transcript is included in this investigative casebook. For a summary of Deputy Taylor's statement refer to **Exhibit A**, **page 50**. For his complete and detailed statement refer to the verbatim transcript.

#### IAB INTERVIEW OF DEPUTY MAT TAYLOR

IAB Lieutenant Stefanie Fredericks checked to see that the Watch Commander, Sergeant Michelle Hall, took reasonable steps to ensure that the involved and witness personnel did not discuss the incident among themselves or with uninvolved persons prior to being interviewed by the assigned investigators, and that the involved and witness personnel did not collectively consult with their attorney or representative. In addition, IAB Lieutenant Fredericks checked to see if the Watch Commander attempted to have involved and witness personnel gather in the company of a supervisor (Sergeant Faye Bugarin) until they have provided a statement to the assigned investigators.

Deputy **Mat Taylor** was interviewed on Wednesday, March 17, 2010. This interview was audio recorded and the verbatim transcript is included in this investigation. Witness Taylor wrote a supplemental report describing his actions and observations during this incident **[Exhibit A]**. The following is a summary of Deputy Taylor's interview in which he explained his actions and observations regarding the shooting and use-of-force. For his complete statement refer to the verbatim transcript in this case book and the digital audio file.

Deputy Taylor stated that while working with his partner Deputy they observed what they believed to be a hand to hand narcotic transaction. Deputy Taylor was the driver and pulled their patrol car into a position to conduct a pedestrian stop of Suspect Alonzo. At the on-set of the pedestrian stop Suspect Alonzo placed his right hand in the front right pocket of the short pants he was wearing. Suspect Alonzo did not comply with orders to remove his hand from his pocket. Suspect Alonzo looked directly at both deputies and Deputy Taylor believed that Suspect Alonzo was trying to decide whether to engage the deputies or flee. Suspect Alonzo attempted to scale a high fence using only his left hand, keeping his right hand in his pocket. After this failed attempt to scale the fence, Suspect Alonzo turned away from the deputies. Deputy Taylor said he lost sight of the suspect's right hand and feared that the suspect may have been arming himself to engage. Deputy Taylor heard weapon discharge and saw the suspect fall to the ground. Deputy Deputy Taylor then handcuffed the suspect while Deputy provided cover. The deputies initiated a radio broadcast regarding the incident, requested paramedics, and provided medical treatment to the suspect until the paramedics arrived. INVOLVED DEPUTY STATEMENTS vas interviewed by Homicide Bureau investigators regarding his Deputy observations and actions during this incident. This interview was audio recorded and the verbatim transcript is included in this investigative casebook. For a summary of Deputy statement refer to Exhibit A, page 53. For his complete and detailed statement refer to the verbatim transcript. IAB INTERVIEW OF DEPUTY Deputy was interviewed on Wednesday, March 17, 2010. This interview was audio recorded and the verbatim transcript is included in this investigation. Deputy wrote a Supplemental Report describing his actions and observations during this incident [Exhibit A]. The following is a summary of Deputy interview in which he explained his actions and observations regarding the shooting. For his complete statement refer to the verbatim transcript in this case book and the digital audio file. Deputy stated that while working with his partner Deputy Tayl<u>or, they o</u>bserved what they believed to be a hand to hand narcotic transaction. Deputy was the passenger and Deputy Taylor was the driver of the radio car. Deputy Taylor pulled their patrol car into a position to conduct a pedestrian stop of Suspect Alonzo. Deputy said that after they pulled into position to conduct the pedestrian stop, he saw Suspect Alonzo look in their direction, place his right hand in the front right pocket of his short pants. Suspect Alonzo turned his body slightly, blading himself away from the

suspect may have been armed. Both deputies began giving the suspect verbal commands

deputies position and bent at the knees. This alarmed Deputy

and he feared the

to remove his hand from his pocket; however, Suspect Alonzo did not comply. Suspect Alonzo paused for a brief moment and then attempted to scale a high fence he was standing near. Suspect Alonzo attempted to scale the fence using only his left hand and kept his right hand in his pocket.

After an unsuccessful attempt at scaling the fence, the suspect turned away from the deputies' direction. As the suspect was turning, Deputy saw Suspect Alonzo start what deputy described as a weapon drawing motion. Deputy stated that Suspect Alonzo lifted his right elbow high, much higher then needed to simply remove his hand from his pocket, and began drawing his right hand from his pocket. Deputy perceived this as a threat and thought that Suspect Alonzo was drawing a firearm, while turning away from the deputies to shield the firearm from view. Seeing this action and fearing that he and his partner were about to be fired upon, Deputy fired one round from his handgun striking the suspect.

Deputy indicated that he saw the suspect immediately fall to the ground and both of his hands came into view. Deputy covered Suspect Alonzo at gun point while Deputy Taylor handcuffed him. Deputy stated that he was well aware of his backdrop and there was nothing in his field of fire between him and the suspect.

#### SUSPECT STATEMENTS

Suspect Alonzo did not make a statement regarding this incident.

#### WITNESS INTERVIEW

Witness was interviewed on Thursday, January 14, 2010 by Homicide Bureau investigators. This interview was audio recorded and the verbatim transcript is included in this investigative casebook. For a summary of Witness statement refer to **Exhibit A, page 56**. For her complete and detailed statement refer to the verbatim transcript.